TOI TRAVEL PAY CONTACT LIST:

Toll-Free

Customer Information Number
1-888-DFAS-DNO
1-888-332-7366 prompts 1 and 1

Fax Numbers
(317) 510-2189
(317) 510-1190

Mailing Address
DFAS-IN/Contingency Travel
Dept. 3900
8899 E. 56th St.
Indianapolis, IN 46249-3900

TOI TRAVEL PAY VISION

We are committed to provide the most cost effective and timely travel payments for our customers.

Keeping Customers Informed!!

TRAVEL PAY BULLETIN

DEFENSE FINANCE AND ACCOUNTING SERVICE INDIANAPOLIS CENTER

TRAVEL OPERATIONS INDIANAPOLIS

Contingency Operations Travel

Contingency Operations Travel Guide

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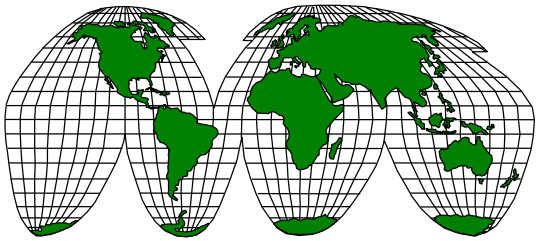

- Overview
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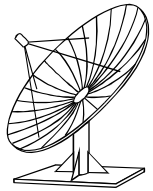
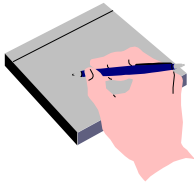




Contingency Operations Travel (OCT 2001)

Contingency Operations Travel-Indianapolis processes TDY and TCS travel for mobilized Army Reserves and National Guard. The travel voucher that you submit represents money in your bank account. We want you to receive your travel payments in a timely manner. The primary way for you to ensure this happens is to fill out your travel voucher (DD-1351-2) correctly and provide all necessary documentation.

REQUESTING ADVANCE

To request a travel advance you should fax a copy of your orders and include a cover sheet with name, address, and current phone number. You are encouraged to use a Travel Advance Request Sheet. Government Sponsored Charge cardholders are not entitled to government disbursed advances. Cardholders should get needed funds from an

SUBMITTING VOUCHER

You should submit your voucher within **five** days of completing your travel and being released from Active Duty.

A complete travel package includes the original or 1 clear copy of:

- DD Form 1351-2
- Orders (mob, demob/DD214, TCS, 1610s, etc.)
- Amendments (if issued)
- Statement of non-availability (if required)
- Lodging receipts
- Any receipts $75.00 or more

The following check list should help us in this endeavor:

1) Sign your voucher.
2) Provide a day-time phone number.
3) Staple attachments to voucher.
4) Double check your voucher to ensure all information is correct.
5) Keep a copy of your complete

DFAS - IN/Contingency Travel
Dept. 3900
8899 East 56th Street
Indianapolis, IN 46249-3900

SIGNING UP FOR EFT

Payment by EFT is mandatory for federal payments including travel for military and civilians. To sign up for EFT, mail or fax a completed SF1199A or a voided personal check to the Travel Pay Division prior to traveling or with your next claim.

The web site for the **SF 1199A is http://web1.whs.osd.mil/ICDHOME/SFEFORMS.HTM**

CUSTOMER INQUIRIES

If you have questions concerning your travel payment or need additional information, please call a customer service representative at **(1-888-332-7366**

Contingency Operations Travel (OCT 2001)
ADVANCES

Q. HOW DO I GET AN ADVANCE? ***NOTE: ADVANCES ARE NOT AUTHORIZED FOR SOLDIERS DEPLOYING FOR OPERATION JOINT FORGE (SFOR or KFOR)***

The orders must state that you are a non-charge cardholder or travel circumstances prohibit the use of a charge card. If this is the case, fax one copy of your orders to Contingency Operations Travel-Indianapolis.

Include a cover sheet requesting an advance with your name, address and day-time phone number.

If you do not have EFT, also include a completed SF1199A or a voided personal check. You are encouraged to use the Travel Advance Request form for advances.

Q. WHERE DO I FAX OR MAIL THE ORDERS TO REQUEST AN ADVANCE?

The mailing address is: DFAS-IN/Contingency Operations Travel
Dept. 3900
8899 East 56th Street
Indianapolis, IN 46249-3900

The fax numbers are: COM (317) 510-2189 or (317) 510-1190
DSN 699-2189 or 699-1190

Q. WHEN SHOULD AN ADVANCE BE REQUESTED?

An advance can be requested anytime prior to travel but will not be processed until 10 days prior to your departure. Government Sponsored Charge cardholders are not entitled to advances except in rare

Contingency Operations Travel (OCT 2001)
ACCRUALS

Q. WHAT IS AN ACCRUAL/PARTIAL PAYMENT?

An accrual is a partial payment of TDY/TCS expenses incurred while mobilized for a contingency operation (over 139 days).

Q. WHEN SHOULD ONE REQUEST AN ACCRUAL?

An accrual should be requested after 30 days of TDY/TCS have elapsed. Each request for an accrual should indicate the 30 day period being requested: 1st, 2nd, 3rd. A final settlement is required upon completion of travel and it is at that time when advances will be collected.

Q. HOW WOULD ONE COMPLETE THE PAPERWORK?

The top of the DD 1351-2 must read "Continued TDY in place". Complete blocks 1-10 with the required information. Block 15 (Itinerary) should begin with the 1st TDY day through the 30th day. Block 18 must reflect the expenses for the 30 days (lodging, rental car, etc.). If a control number has been issued by the billeting office for use of commercial meals and/or lodging, it should also be placed in block 18.

.

Q. WHAT DOCUMENTS ARE REQUIRED?

Original or one copy of DD 1351-2 form marked "ACCRUAL," orders, lodging receipts, and any items of expense $75.00 or more.

Q. WHERE DO I CALL FOR QUESTIONS?

Contingency Operations Travel (OCT 2001)

ACCRUALS (cont)

An accrual should be requested after 30 days of TDY have elapsed. Each request for an accrual should indicate the 30 day period being requested: 1st, 2nd, 3rd, etc. A final settlement is required upon completion of travel and it is at that time when advances will be collected.

First Accrual Voucher

- If the travel begins during the first 15 days of the calendar month, the request would be from the first day of travel through the end of the month.

Example 1: Travel begins on the 9th of May. Class begins on the 12th of May.
1st voucher would be from the 9th to the end of the month.

- If travel begins after the 15th of the month, the request would be from the first day of travel through the end of the following month.

Example 2: Travel begins on the 16th of May. Class begins on the 18th of May.
1st voucher would be from the 16th of May through 30 ***June.***

Full Calendar Month Accruals

Subsequent accruals will be filed on a monthly basis until the final voucher is submitted.

Final Accrual Voucher

- If travel ends before the 16th of the month, there are two scenarios for the final accrual voucher.

Example 1: Travel ends on the 14th of May and an advance ***was*** received.
Last voucher would be from the 1st of April through 14 May.

Example 2: Travel ends on 14th of May and an advance was ***not*** received.
Last voucher would be from the 1st of May through 14 May.

- If travel ends on or after the 16th of the month, the voucher would be from the 1st day of the month to the last day of travel, regardless of an advance received.

Example: Travel ends on the 25th of May
Last voucher would be from the 1st of May through the 25th of May

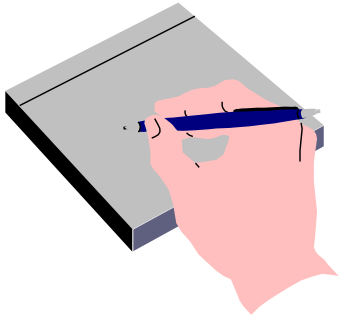
Contingency Operations Travel (Oct 2001)
ACCRUALS (cont)

DETAILED EXAMPLES

Below are three examples of different TDY situations and what dates should be included on the accrual requests based on each situation.

- **Example 1:** TDY 7 March - 11 June
  *An advance **was** received*

  Accrual request 1 7 - 31 March
  Accrual request 2 1 - 30 April
  Accrual request 3 1 May - 11 June



- **Example 2:** TDY 7 March - 11 June
  *An advance was **not** received*

  Accrual request 1 7 - 31 March
  Accrual request 2 1 - 30 April
  Accrual request 3 1 - 31 May
  Accrual request 4 1 -11 June

- **Example 3:** TDY 24 January - 25 May

  Accrual request 1 24 January - 28 February
  Accrual request 2 1 - 31 March
  Accrual request 3 1 - 30 April
  Accrual request 4 1 - 25 May

Customer Information Number 1-888-332-7366 prompts 1 and 1

Supplemental accruals ***will not be*** accepted. Underpayments in basic allotments for preceding accruals can be claimed on subsequent accrual requests.

1-888-DFAS-DNO (1-888-332-7366) **http://info-in-dno.dfas.mil**

Contingency Operations Travel (OCT
FINAL SETTLEMENTS

Q. HOW DO I GET REIMBURSED FOR TRAVEL?
To get reimbursed for travel expenses, you must submit a DD 1

Q. WHEN SHOULD I SUBMIT THE TRAVEL VOUCHER?
You should submit your DD 1351-2 within **five days** of comple
and being released from active duty.

Q. WHAT DOCUMENTS ARE REQUIRED?
The basic travel package includes the original DD 1351-2 and
a. Your orders and amendments (if any)
b. Lodging receipts
c. All receipts $75.00 or more

Q. WHERE DO I MAIL MY SETTLEMENT VOUCHER?
DFAS-IN/Contingency Operations Travel
Dept. 3900
8899 East 56th Street
Indianapolis, IN 46249-3900

The fax numbers are: COM (317) 510-2189 or (
DSN 699-2189 or 699-1190

Q. WHERE DO I CALL FOR QUESTIONS?
If you have questions concerning your travel payment, please call a customer service representative.
1-888-332-7366 **(prompts 1 and 1)**

TIPS

1. Sign your claim
2. Staple all attachments t your claim.
3. Staple only one claim wi all supporting documents together.
4. Provide a day time phon number where you can be reached.
5. Retain a copy of your cla for your records.

Contingency Operations Travel (OCT 2
eration Joint Forge (SFOR and KF

Subject: Travel Settlement Vouchers for Operation Joint Forge (SFOR and KFOR)

The following list is provided to assist soldiers in preparing their final travel settlement claims for Operation Joint Forge (SFOR and KFOR). The documents should be attached to a completed 1351-2 (Travel Voucher Summary) in the order given below:

a. All Mobilization Orders (call-up, TCS, attachments, endorsements, etc)
b. Additional TDY Orders (i.e. 1610s)
c. Demobilization Orders (REFRAD or DD214)
d. All Previous Accruals/Advances Received from Overseas Finance Offices
(non-submission of previous payment data will result in delays of payment)
e. Receipts for All Lodging, Regardless of Amount
f. All Receipts for Expenses Incurred for $75.00 and Over
g. DA 31 Leave Form (or leave must be annotated on the 1351-2)
h. **IF APPLICABLE**: Statement of Non-Availability/Control Number for Commercial Quarters (i.e. hotel)
i. **IF APPLICABLE**: Claims for Postage Reimbursement must include:
    1. Authorization in orders
    2. Authorization/memorandum from local transportation office
    3. Receipt(s) (insurance is not reimbursable)
    NOTE: **Soldiers with ultimate destination of Hungary, Croatia, Bosnia, Macedonia, Kosovo and/or other areas located in the Area of Responsibility (AOR) are *NOT* authorized a TCS shipment and will not be reimbursed.**
j. **IF APPLICABLE**: Claims for Rental Car Reimbursement must include:
    1. Authorization in orders (signature in block 21A of 1351-2 is not acceptable)
    2. Rental contract
    3. Receipt(s)

Contingency Operations Travel (OCT 2
OJF (SFOR and KFOR) cont.

k. **IF APPLICABLE**: Service members entitled to Proportional or Commercial Meals must have an endorsement to TCS orders from the gaining command overseas. Memorandums are NOT acceptable for reimbursement of meals.

l. **ENTITLEMENTS**: Service members deployed to the Area of Responsibility (AOR), which includes Bosnia, Hungary, Croatia, Macedonia, and Kosovo, are entitled to the incidental expense rate of $3.50 per day only. Memorandums and orders authorizing an increase up to the local incidental rate of $15.00 per day are not valid and will not be used for payment. The rate is established by the 266th Finance Command in conjunction with guidance from the Department of Army.

m. **DIRECT DEPOSIT**: Service members should provide direct deposit information for their financial institution by submitting a SF1199 Direct Deposit Form or a voided check with their claim.

Voucher submission will be made to: **DFAS-IN/Contingency Travel**
Dept. 3900
8899 E. 56th St.
Indianapolis, IN 46249-3900

For further information on the completion and submission of DD Form 1351-2/2C for final settlement, contact the Operation Joint Forge/Contingency Operations Travel Division at **1-888-DFAS-DNO (1-888-332-7366) extension 1** and **1**.

Contingency Operations Travel SPLIT-DISBURSEMENTS (OCT 2001)

The Department of Defense (DOD) has a "split-disbursement" payment option for travelers using the DOD's government charge card. When submitting travel settlements, DOD travelers may elect Electronic Fund Transfer (EFT) to send a designated part of the traveler's reimbursement to the DOD charge card and the balance to the traveler's designated financial institution account. Split-disbursements allow payments to be sent directly to the DOD government charge card account, eliminating the traveler as a middleman.

To elect the split-disbursement payment option:

1. Make sure an EFT relationship has been established with your designated financial institution.*
2. Determine the amount you want to be send directly to your government charge card account and enter
that amount on the travel voucher (DD Form 1351-2) in block 1.

Example: Traveler is due $725 in official travel reimbursement and elects to send the government charge card a split-disbursement to pay the $600 charged on the DOD's traveler's government charge card for hotels, meals, and rental car expense. In the **travel voucher's block 1** enter: "SPLIT $600." The remaining $125 reimbursement is sent via EFT to your designated financial institution account.

*When establishing an EFT, submit a Standard Form 1199A (Direct Deposit Sign-Up Form) or a voided personal check, with the settlement voucher.

Contingency Operations Travel SUPPLEMENTALS (Mar 2001)

Q. WHAT DO I DO WHEN I FEEL I'VE BEEN PAID IN ERROR?

When it is suspected that an error and/or omission has been made in the payment of a travel voucher, please call our Travel Customer Service representative. They will provide you with an explanation of the payment you received, phone 1-888-332-7366 (prompts 1 and 1).

Q. WHAT DO I DO WHEN AN ERROR OR OMISSION HAS OCCURRED?

When an error or omission has occurred due to an error on the part of the traveler, you need to submit a supplemental claim.

When an error or omission has occurred due to an error on the part of Travel Pay Services, the supplemental claim will be generated by Travel Pay Services.

Q. HOW DO I PREPARE A SUPPLEMENTAL CLAIM?

The supplemental claims must include:

a. A DD1351-2 marked SUPPLEMENTAL. Provide a full explanation of the item(s) of expense in question on the revised DD1351-2 or on a separate sheet of paper.

b. A copy of the Advice of Payment voucher in question.

c. A copy of the initial DD 1351-2 and continuation sheets.

d. One copy of the orders and amendments.

e. A copy of all supporting documentation applicable to the supplemental claim. If not available, provide a written statement attesting to the accuracy of items claimed for which no receipt

Contingency Operations Travel (OCT 2001)
Highlights of Settlement Voucher Preparation

4 Key Items:

1. One Copy of Orders & Supporting Documents.

2. Claim all Previous Payments. All Adv(s) Paid by Finance or DJMS Or Indicate "NONE."

3. Complete Itinerary, Reimbursable Expenses, & POC Travel.

4. Claimant's Signature & Date.

1 Copy of Additional Documents as Required:

- Receipt (Not the Ticket) for unused portions of airline tickets.
- Leave Form
- Installation or LSP non-availability control number must be annotated on the DD 1351-2.

1 Copy of orders (original & amendment)

Original DD 1351-2

TRAVEL VOUCHER OR SUBVOUCHER

Read Privacy Act Statement, Penalty Statement, and Instructions on back before completing form. Use typewriter, ink, or ball point pen. PRESS HARD. DO NOT use pencil. If more space is needed, continue in remarks.

1. PAYMENT: [X] Electronic Fund Transfer (EFT) [ ] Payment by Check — Split Disbursement: Amt to Govt Tvl Charge Card $ 100.00
2. TYPE OF PAYMENT: [X] TDY [ ] Member/Employee [ ] PCS [ ] Other [ ] Dependent(s) [ ] DLA
3. FOR D.O. USE ONLY — a. D.O. VOUCHER NUMBER — b. SUBVOUCHER NUMBER — c. PAID BY
4. NAME (Last, First, Middle Initial) (Print or type): WHITENER, JOHN L.
5. GRADE: 04/MAJ
6. SSN: 255-55-5555
7. ADDRESS: a. NUMBER AND STREET: 2010 BUNGALOW ROAD — b. CITY: HINESVILLE — c. STATE: GA — d. ZIP CODE: 30830-
8. DAYTIME TELEPHONE NUMBER & AREA CODE: (912) 368-1811
9. TRAVEL ORDER NUMBER: 03-010
10. PREVIOUS GOVERNMENT PAYMENTS/ADVANCES: NONE
11. ORGANIZATION AND STATION: 81st RSC
12. DEPENDENT(S) (X and complete as applicable): [ ] ACCOMPANIED [ ] UNACCOMPANIED — a. NAME (Last, First, Middle Initial) — b. RELATIONSHIP — c. DATE OF BIRTH OR MARRIAGE
13. DEPENDENTS' ADDRESS ON RECEIPT OF ORDERS (Include Zip Code)
14. HAVE HOUSEHOLD GOODS BEEN SHIPPED? (X one): [ ] YES [ ] NO (Explain in Remarks) — d. COMPUTATIONS
15. ITINERARY

a. DATE 2001		L. PLACE (Name, Office, Base, Activity, City and State; City and Country, etc.)	f. MEANS/MODE OF TRAVEL	g. REASON FOR STOP	h. LODGING COST	i. POC MILES
03-01	DEP	HINESVILLE, GEORGIA	Alt			
03-01	ARR	FT. GORDON, GEORGIA	Tc		$220.00	138
03/05	DEP		Alt			
03/05	ARR	HINESVILLE, GEORGIA	Mi			138
	DEP					
	ARR					
	DEP	STATEMENT OF NON-AVAILABILITY CONTROL #-35789				
	ARR					
	DEP	FOR LODGING				
	ARR					
	DEP					
	ARR					

j. SUMMARY OF PAYMENT: (1) Per Diem; (2) Actual Expense Allowance; (3) Mileage; (4) Dependent Trave; (5) DLA; (6) Reimbursable Expenses; (7) Total; (8) Less Advance; (9) Amount Owed; (10) Amount Due

16. POC TRAVEL (X one): [ ] OWN/OPERATE [X] PASSENGER
17. DURATION OF TDY TRAVEL: 12 HOURS OR LESS [ ]; MORE THAN 12 HOURS BUT 24 HOURS OR LESS [ ]; MORE THAN 24 HOURS [X]
18. REIMBURSABLE EXPENSES

a. DATE	b. NATURE OF EXPENSE	c. AMOUNT	d. ALLOWED
03/05	ROOM TAX FOR 4 NIGHTS	28.00	
0305	HOTEL PARKING 4 NIGHTS	16.00	
03/05	REGISTRATION FEE	100.00	

19. GOVERNMENT/DEDUCTIBLE MEALS — a. DATE — b. NO. OF MEALS — a. DATE — b. NO. OF MEALS

20.a. CLAIMANT SIGNATURE: John L. Whitener — b. DATE: 03/05/01
c. SUPERVISOR SIGNATURE: Robert B. Gooden — d. DATE: 03/06/01
21.a. APPROVING OFFICER SIGNATURE: G. R. Jackson, RMO (912) 368-1812 — b. DATE: 3/07/01
22. ACCOUNTING CLASSIFICATION: SEE REMARKS IN BLOCK #29.

24. COMPUTED BY | 25. AUDITED BY | 26. TRAVEL ORDER POSTED BY | 27. RECEIVED (Payee Signature and Date or Check No.) | 28. AMOUNT PAID

DD FORM 1351-2, MAR 2000 — PREVIOUS EDITIONS OF DD FORM 1351-2 AND 1351-1 MAY BE USED UNTIL SUPPLY IS EXHAUSTED. Exception to SF 1012 approved by GSA/IRMS 12-91

Contingency Operations Travel (OCT 2001)

Highlights of Advise of Payment Voucher

1-888-326-7366

Centralized Disbursing's address and location

TRAVEL ORDER

*WORK CENTER DESIGNATOR CODE

DISALLOWANCE EXPLANATION

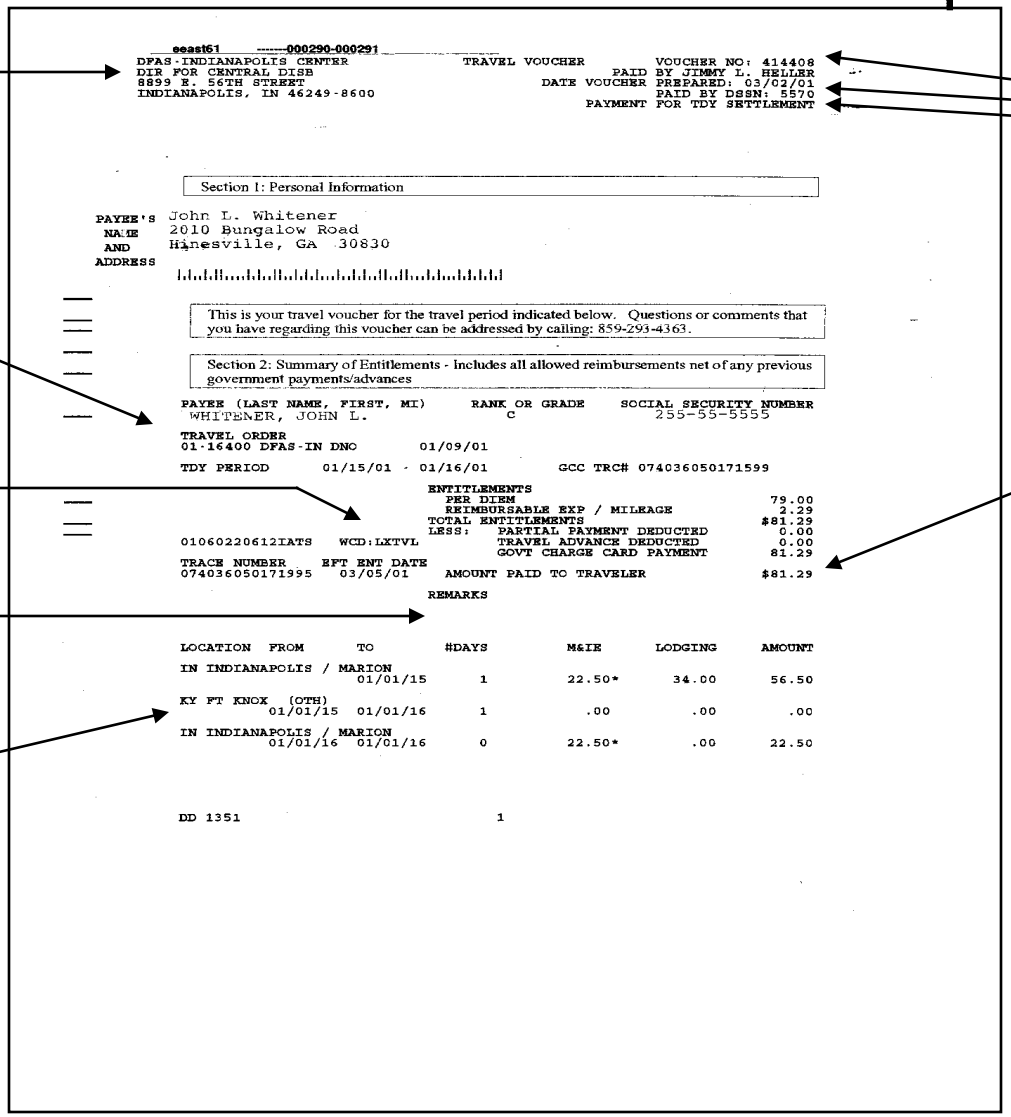
TDY POINT

VOUCHER NUMBER

PAYING DSSN

TYPE OF TRAVEL PERFORMED

DISBURSED AMOUNT



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DFAS-INDIANAPOLIS CENTER
DIR FOR CENTRAL DISB
8899 E. 56TH STREET
INDIANAPOLIS, IN 46249-8600

TRAVEL VOUCHER

VOUCHER NO: 414408
PAID BY JIMMY L. HELLER
DATE VOUCHER PREPARED: 03/02/01
PAID BY DSSN: 5570
PAYMENT FOR TDY SETTLEMENT

Section 1: Personal Information

PAYEE'S NAME AND ADDRESS
John L. Whitener
2010 Bungalow Road
Hinesville, GA 30830

This is your travel voucher for the travel period indicated below. Questions or comments that you have regarding this voucher can be addressed by calling: 859-293-4363.

Section 2: Summary of Entitlements - includes all allowed reimbursements net of any previous government payments/advances

PAYEE (LAST NAME, FIRST, MI)	RANK OR GRADE	SOCIAL SECURITY NUMBER
WHITENER, JOHN L.	C	255-55-5555

TRAVEL ORDER
01-16400 DFAS-IN DNC 01/09/01

TDY PERIOD 01/15/01 - 01/16/01 GCC TRC# 074036050171599

ENTITLEMENTS	
PER DIEM	79.00
REIMBURSABLE EXP / MILEAGE	2.29
TOTAL ENTITLEMENTS	$81.29
LESS: PARTIAL PAYMENT DEDUCTED	0.00
TRAVEL ADVANCE DEDUCTED	0.00
GOVT CHARGE CARD PAYMENT	81.29

010602206121ATS WCD:LXTVL

TRACE NUMBER	EFT ENT DATE	AMOUNT PAID TO TRAVELER
074036050171995	03/05/01	$81.29

REMARKS

LOCATION	FROM	TO	#DAYS	M&IE	LODGING	AMOUNT
IN INDIANAPOLIS / MARION		01/01/15	1	22.50*	34.00	56.50
KY FT KNOX (OTH)	01/01/15	01/01/16	1	.00	.00	.00
IN INDIANAPOLIS / MARION	01/01/16	01/01/16	0	22.50*	.00	22.50

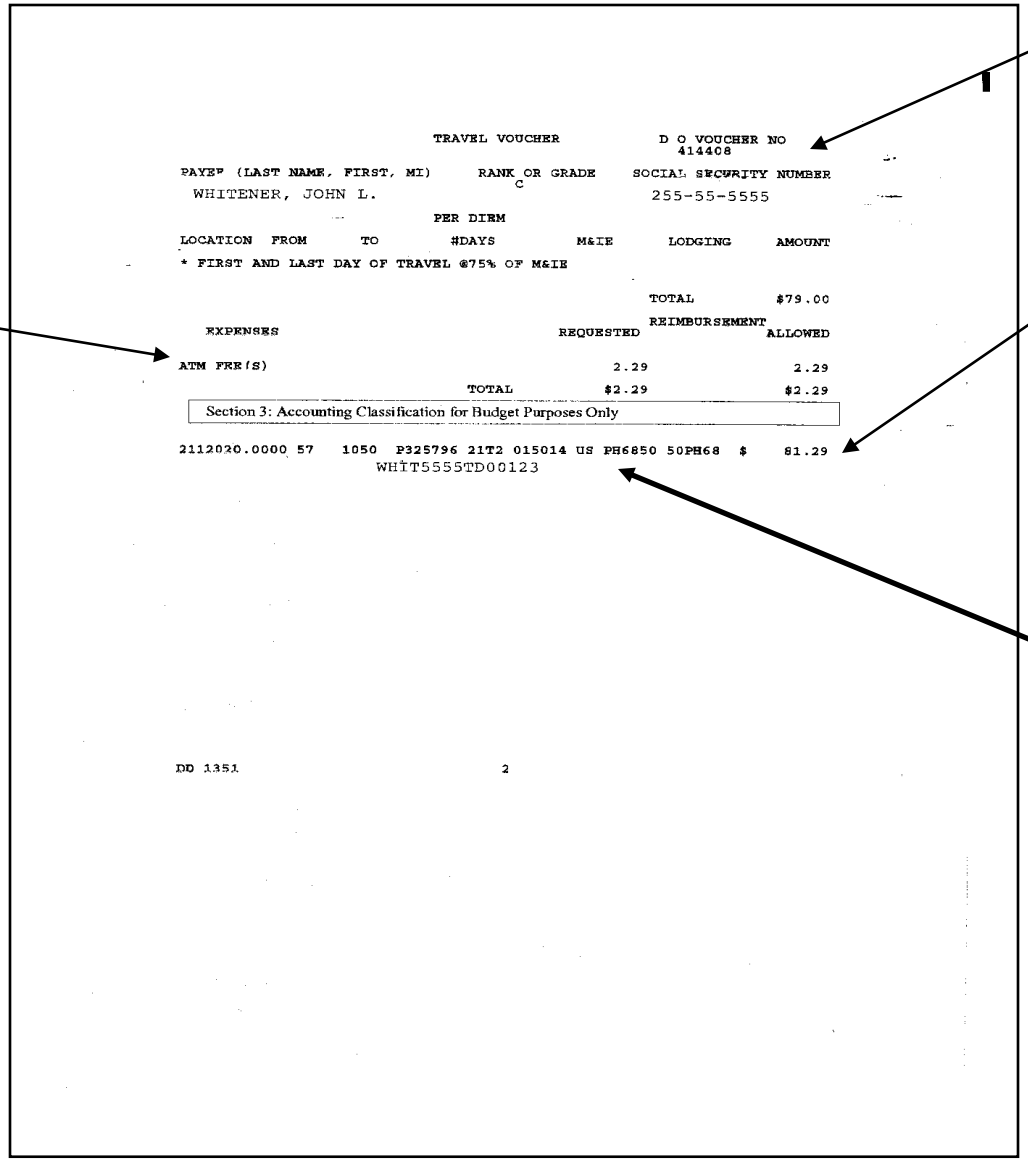
DD 1351 1

*The Work Center Designator Code (WCD) identifies what location computed your travel claim, the example above identifies that this claim was computed by LXTVL or Lexington OPLOC..

Contingency Operations Travel (OCT 2001)

Highlights of Advise of Payment Voucher (Continued)

1-888-326-7368



TRAVEL VOUCHER

D O VOUCHER NO
414408

PAYEE (LAST NAME, FIRST, MI) WHITENER, JOHN L.

RANK OR GRADE C

SOCIAL SECURITY NUMBER 255-55-5555

PER DIEM

LOCATION	FROM	TO	#DAYS	M&IE	LODGING	AMOUNT
* FIRST AND LAST DAY OF TRAVEL @75% OF M&IE						
					TOTAL	$79.00

EXPENSES	REQUESTED	REIMBURSEMENT ALLOWED
ATM FEE(S)	2.29	2.29
TOTAL	$2.29	$2.29

Section 3: Accounting Classification for Budget Purposes Only

2112020.0000 57 1050 P325796 21T2 015014 US PH6850 50PH68 $ 81.29
WHITT5555TD00123

DD 1351 2

VOUCHER NUMBER

REIMBURSABLE EXPENSES

DISBURSED AMOUNT

ACCOUNTING CLASSIFICATION

Contingency Operations Travel

TRAVEL CUSTOMER SERVICE INQUIRIES (OCT 2001)

Use this bulletin to assist you in reaching the correct customer service representative for your travel pay inquiry within Travel Operations-Indianapolis (TOI).

Toll Free Number: 1-888-332-7366 prompts 1 and 1
Hours of Operation: 7:30 - 11:30AM Noon - 4:00PM Eastern Standard Time (No time changes)

TRAVEL

- **For Travel Pay Customer Inquires please press "1"**
- **Please listen carefully to the following "8" selections:**

PRESS "1" - For Operation Joint Forge & Other Contingency Operations

PRESS "2" - For Reserve Travel TDY

PRESS "3" - All Other